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## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	10/092,954
Filing Date	March 6, 2002
First Named Inventor	David D. Konieczynski
Group Art Unit	3763
Examiner Name	Not Yet Assigned
Total Number of Pages in This Submission	Attorney Docket Number 022719-0023

### ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input checked="" type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Declaration and Power of Attorney <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below)  1. Check in the amount of \$1,230.00; 2. Copy of Part 2 Notice to File Missing Parts; and 3. Return Postcard.
Remarks		

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual Name	NUTTER MCCLENNEN & FISH LLP William C. Geary III
Signature	
Date	May 10, 2002

#### Transmittal

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: Box Missing Parts, Commissioner for Patents, Washington, DC 20231, on the date shown below.

Dated: May 10, 2002

Signature:

(William C. Geary III)



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PTO/SB/17 (11-01)

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# **FEE TRANSMITTAL for FY 2002**

*Patent fees are subject to annual revision.*

Applicant claims small entity status. See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT**      **(*\$*)** **1,230.00**

**Complete if Known**

Application Number	10/092,954-Conf. #7357
Filing Date	March 6, 2002
First Named Inventor	David D. Konieczynski
Examiner Name	Not Yet Assigned
Group Art Unit	3763
Attorney Docket No.	022719-0023

**METHOD OF PAYMENT (check all that apply)**

Check     Credit Card     Money Order     Other     None  
 Deposit Account

Deposit Account Number **141449**

Deposit Account Name **Nutter McCennen & Fish LLP**

The Commissioner is hereby authorized to: (check all that apply)

Charge fee(s) indicated below     Credit any overpayments  
 Charge any additional fee(s) during the pendency of this application  
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

**FEE CALCULATION**

**1. BASIC FILING FEE**

**Large Entity**    **Small Entity**

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
101	740	201	370	Utility filing fee	740.00
106	330	206	165	Design filing fee	
107	510	207	255	Plant filing fee	
108	740	208	370	Reissue filing fee	
114	160	214	80	Provisional filing fee	
<b>SUBTOTAL (1)</b>		<b>(<i>\$</i>)</b>	<b>740.00</b>		

**2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE**

Total Claims	-20 =	Extra Claims	Fee from below	Fee Paid
40	-20 =	20	x 18 =	360.00
Independent Claims	3	-3 =	0 x 0 =	
Multiple Dependent				

**Large Entity**    **Small Entity**

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
103	18	203	9	Claims in excess of 20
102	84	202	42	Independent claims in excess of 3
104	280	204	140	Multiple dependent claim, if not paid
109	84	209	42	** Reissue independent claims over original patent
110	18	210	9	** Reissue claims in excess of 20 and over original patent
<b>SUBTOTAL (2)</b>		<b>(<i>\$</i>)</b>	<b>360.00</b>	

\*\* or number previously paid, if greater. For Reissues, see above

**FEE CALCULATION (continued)**

**3. ADDITIONAL FEES**

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge - late filing fee or oath	130.00
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for ex parte reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	
116	400	216	200	Extension for reply within second month	
117	920	217	460	Extension for reply within third month	
118	1,440	218	720	Extension for reply within fourth month	
128	1,960	228	980	Extension for reply within fifth month	
119	320	219	160	Notice of Appeal	
120	320	220	160	Filing a brief in support of an appeal	
121	280	221	140	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1,280	241	640	Petition to revive - unintentional	
142	1,280	242	640	Utility issue fee (or reissue)	
143	460	243	230	Design issue fee	
144	620	244	310	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Processing fee under 37 CFR 1.17(q)	
126	180	126	180	Submission of Information Disclosure Stmt	
581	40	581	40	Recording each patent assignment per property (times number of properties)	
146	740	246	370	Filing a submission after final rejection (37 CFR 1.129(a))	
149	740	249	370	For each additional invention to be examined (37 CFR 1.129(h))	
179	740	279	370	Request for Continued Examination (RCE)	
169	900	169	900	Request for expedited examination of a design application	
Other fee (specify)					
*Reduced by Basic Filing Fee Paid		<b>SUBTOTAL (3)</b>		<b>(<i>\$</i>)</b>	<b>130.00</b>

SUBMITTED BY		Complete if applicable			
Name (Print/Type)	William C. Geary III	Registration No. (Attorney/Agent)	31,359	Telephone	(617) 439-2766
Signature	<i>W.C. Geary III</i>			Date	May 10, 2002